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FORM X-17A-5
PART III

MAY 0 2 2004

SEC FILE NUMBER 8- 51997

FACING PAGE

Information Required of Brokers and Dealers Pursuant to Section 17 of the Securities Exchange Act of 1934 and Rule 17a-5 Thereunder

REPORT FOR THE PERIOD BEGINNIN	G_01/01/03	AND ENDING T	AND ENDING	
	MM/DD/YY		MM/DD/YY	
A. R	EGISTRANT IDENTIFI	CATION		
NAME OF BROKER-DEALER: BRO	KERAGEAMERICA LLC		OFFICIAL USE ONLY	
ADDRESS OF PRINCIPAL PLACE OF BUSINESS: (Do not use P.O. Box No.)		Box No.)	FIRM I.D. NO.	
425 PARK AVENUE 22nd FL	OOR		•	
	(No. and Street)			
NEW YORK	NY		10022	
(City)	(State)		(Zip Code)	
NAME AND TELEPHONE NUMBER OF NORA DEFALCO	PERSON TO CONTACT IN	REGARD TO THIS RI	EPORT 415-383-7671	
· · · · · · · · · · · · · · · · · · ·			(Area Code – Telephone Number	
B. A0	CCOUNTANT IDENTIFI	CATION		
INDEPENDENT PUBLIC ACCOUNTAN LIEBMAN GOLDBERG & DROGI	N LLP (Name - if individual, state last,	first, middle name)		
591 STEWART AVE SUITE	450 GARDEN CITY	NY	11530	
(Address)	(City)	, (State)	(Zip Code)	
CHECK ONE:		PROCE	SSED .	
☑ Certified Public Accountant	1	_		
☐ Public Accountant		14	. ZUU4	
	United States or any of its poss	essions. THOM:	SON CIAL	
	FOR OFFICIAL USE O	NLY		
				

*Claims for exemption from the requirement that the annual report be covered by the opinion of an independent public accountant must be supported by a statement of facts and circumstances relied on as the basis for the exemption. See Section 240.17a-5(e)(2)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

OATH OR AFFIRMATION

ANDREW SYCOFF	, swear (or affirm) that, to the best of
my knowledge and belief the accompanying financial statem	ent and supporting schedules pertaining to the firm of
BROKERAGEAMERICA LLC	, as
of DECEMBER 31, ,20	03 , are true and correct. I further swear (or affirm) that
	fficer or director has any proprietary interest in any account
classified solely as that of a customer, except as follows:	
	a desath
	Signature
ħ	CEO
Revan R. St	Title
Notary Public, Star	te of New York
No. 019C8 Notary Public No. 019C8 Qualified in Que	
Commission Expire	
This report ** contains (check all applicable boxes):	
(a) Facing Page.	
(b) Statement of Financial Condition.	
(c) Statement of Income (Loss).	
(d) Statement of Changes in Financial Condition.	
(e) Statement of Changes in Stockholders' Equity or Pa	
☐ (f) Statement of Changes in Liabilities Subordinated to ☐ (g) Computation of Net Capital.	Claims of Creditors.
(g) Computation of Net Capital. (h) Computation for Determination of Reserve Requires	ments Pursuant to Rule 15c3.3
(i) Information Relating to the Possession or Control R	
	of the Computation of Net Capital Under Rule 15c3-3 and the
Computation for Determination of the Reserve Requ	
	Statements of Financial Condition with respect to methods of
consolidation.	•
(l) An Oath or Affirmation.	
(m) A copy of the SIPC Supplemental Report.	
[X] (n) A report describing any material inadequacies found t	o exist or found to have existed since the date of the previous audit

^{**}For conditions of confidential treatment of certain portions of this filing, see section 240.17a-5(e)(3).